## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

107/1039

Application or Docket Number

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |   |              |   |              |                  |     | SMALL ENTITY TYPE |                        |     | OTHER THAN<br>SMALL ENTITY |                        |
|---|--|---|--------------|---|--------------|------------------|-----|-------------------|------------------------|-----|----------------------------|------------------------|
| T   | OTAL CLAIMS  |   | 20           |   |              |                  |     | RATE              | FEE                    | ]   | RATE                       | FEE                    |
| F   | OR   |   | NUMBER       | FILED                                       | NUME         | BER EXTRA        |     | BASIC FEE         | 385.00                 | OR  | BASIC FEE                  | 770.00                 |
| Τį  | OTAL CHARGE  | ABLE CLAIMS                               | 20 minus 20= |   | •            | 0                |     | XS 9=             |                        | OR  | X\$18=                     |                        |
| ΙΝ  | DEPENDENT C  | LAIMS                                     | 3 m          | inus 3 =                                    | · D          |                  |     | X43=              |                        | OR  | X86=                       |                        |
| М   | JLTIPLE DEPEN  | NDENT CLAIM P                             | RESENT       |   |              |                  |     | +145=             |                        | OR  | +290=                      |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |  |   |              |   |              |                  |     | TOTAL             |                        | OR  | TOTAL                      | 770-                   |
| CLAIMS AS AMENDED - PART II   |  |   |              |   |              |                  |     | SMALL             | ENITITY                | OR  | OTHER<br>SMALL             |                        |
| <u>.</u>  |  | (Column 1)                                |              | (Colun                                      |              | (Column 3)       | 1   | SMALL             |                        |     | JIIAEE                     | ADDI-                  |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | NUME<br>PREVIO                              | BER          | PRESENT<br>EXTRA |     | RATE              | ADDI-<br>TIONAL<br>FEE |     | RATE                       | TIONAL<br>FEE          |
|   | Total  | •   | Minus        | **  |              | =                |     | X\$ 9=            |                        | OR  | X\$18=                     |                        |
|   | Independent  | •   | Minus        | ***   |              | ]=               |     | X43=              |                        | OR  | X86=                       |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM       |   |              |   |              |                  | ,   | +145=             |                        | OR  | +290=                      | !                      |
| TOTAL   |  |   |              |   |              |                  |     |                   |                        | OR  | TOTAL<br>ADDIT. FEE        |                        |
|   |  |   |              | <i>.</i>                                    | O\           | (Cal 2)          |     | ADDIT. FEE        |                        |     | AUDII. FEET                |                        |
| _   |  | (Column 1) (Column 1) (Column 1) HIGHE    |              |   |              | (Column 3)<br>I  | l r |                   | ADDI-                  | 1 1 |                            | ADDI-                  |
| AMENDMENT B   |  | REMAINING<br>AFTER<br>AMENDMENT           |              | PREVICE PAID                                | BER<br>BUSLY | PRESENT<br>EXTRA |     | RATE              | TIONAL<br>FEE          |     | RATE                       | TIONAL<br>FEE          |
|   | Total  | *   | Minus        | **  |              | =                | ]   | X\$ 9=            |                        | OR  | X\$18=                     |                        |
|   | Independent  |   | Minus        | ***   |              | =                |     | X43= .            |                        | OR  | X86=                       |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM       |   |              |   |              |                  |     | +145=             |                        | OR  | +290=                      |                        |
| TOTAL ·   |  |   |              |   |              |                  |     |                   |                        | OR  | TOTAL<br>ADDIT. FEE        | •                      |
| (Column 1) (Column 2) (Column 3)  |  |   |              |   |              |                  |     |                   |                        |     |                            | •                      |
| AMENDMENT C   |  | CLAIMS REMAINING AFTER AMENDMENT          |              | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR |              | PRESENT<br>EXTRA |     | RATE              | ADDI-<br>TIONAL<br>FEE |     | RATE                       | ADDI-<br>TIÒNAL<br>FEE |
|   | Total  | *   | Minus        | 414   |              | =                |     | X\$ 9=            |                        | OR  | X\$18=                     | ,                      |
|   | Independent  | *   | Minus        | ***   |              | ]=               | X4  | X43=              |                        | OR  | X86=                       |                        |
| L   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145= |   |              |   |              |                  |     |                   |                        | OR  | +290=                      |                        |
| If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  TOTAL  |  |   |              |   |              |                  |     |                   |                        | l   | TOTAL                      |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |              |   |              |                  |     |                   |                        |     |                            |                        |